## BEST AVAILABLE COPY

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD									10015268				
Effective October 1, 2001											,	7 2 6	0
-								SMALI TYPE	EN	YTITY	OR	OTHER SMALL	
TOTAL CLAIMS							ſ	RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED N			ER EXTRA		BASIC FEE 370.00		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			) min	us 20=	*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			) mii	nus 3 =	*	<u> </u>			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT				+140=				OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL 370		OR	TOTAL		
	CI	LAIMS AS A	MENDED	ED - PART II						2/-		OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)	SMALL ENTIT			ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	•	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X42	=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140				+280=	
<u> </u>									TAL		OR	TOTAL	
									EE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	(Column 2) HIGHEST			(Column 3)	1			ADDI	1	F	ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	)=		OR	X\$18=	
	Independent	*	Minus	***		=		X42	=		OR	X84=	
L	FIRST PRESE	ULTIPLE DEF	PENDEN	I CLAIM	<u> </u>		+140	)=		OR	+280=		
	TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	
		•	ADD:1.1				ADDIT: 1 EE						
ပ		(Column 1) CLAIMS REMAINING		HIG	IMN 2) HEST MBER	(Column 3)	1			ADDI-			ADDI-
AMENDMENT C		AFTER AMENDMENT		PREV	OUSLY FOR	EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	)=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =		X42	=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J			-			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		mber Previously Pa					er fou	und in th	е ар	propriate bo	x in co	olumn 1.	